

# Programs for the Handicapped

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## HIGHLIGHTS

**Bridges from School to Working Life**

**Rehabilitation Amendments of 1984**

**Additional National Information Sources**

**Final Rules Protecting Infants**

**New Sources of Disability Statistics**

**New Employment Initiative Announced**

**South Carolina Opens  
Computerized I&R**

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# Bridges from School to Working Life

By Madeleine Will, Assistant Secretary for Special Education and Rehabilitative Services<sup>1</sup>

Youth with disabilities face an uncertain future when they leave the nation's public schools. Qualification for employment is an implied promise of American education, but between 50 and 80 percent of working age adults who report a disability are jobless (U.S. Commission on Civil Rights, 1983; U.S. Bureau of the Census, 1982). Without employment, many individuals turn to community services only to find long waiting lists. Those adults with disabilities who do gain entry into publicly-supported day and vocational services often experience low wages, slow movement toward employment, and segregation from their non-disabled peers (U.S. Department of Labor, 1979).

Approximately one school generation after guaranteeing the right to a free appropriate public education for all children with handicaps, it is appropriate that the federal government address the transition of persons with disabilities from school to working life. The cost of disability joblessness and dependence is high and rising. Approximately eight percent of the gross national product is spent each year in disability programs, with most of this amount going to programs that support dependence (White House Working Group on Disability Policy, 1983). The public's investment in special education can do much to prevent this dependence and lead to full community participation, if systematic attention is now given to the transition of youth with disabilities from school to work and adult life.

The Office of Special Education and Rehabilitative Services (OSERS) has responded to this need by establishing a national priority on improving the transition from school to working life for all individuals with disabilities. This paper describes the concepts and policies that guide OSERS in analyzing transition issues and programming for transition improvements.

## Transition Defined

Transitions are an important part of normal life. As roles, locations, or relationships change, all of us must adapt, and we do so with more or less disruption or stress. The transition from school to working life calls for a range of choices about career options, living arrangements, social life, and economic goals that often have life-long consequences. For individuals with disabilities, this transition is often made even more difficult by limitations that can be imposed by others' perceptions of disability and by the complex array of services that are intended to assist adult adjustment.

The transition from school to working life is an outcome-oriented process encompassing a broad array of services and experiences that lead to employment. Transition is a period that includes high school, the point of graduation,

additional post-secondary education or adult services, and the initial years in employment. Transition is a bridge between the security and structure offered by the school and the opportunities and risks of adult life. Any bridge requires both a solid span and a secure foundation at either end. The transition from school to work and adult life requires sound preparation in the secondary school, adequate support at the point of school leaving, and secure opportunities and services, if needed, in adult situations.

Since the services and experiences that lead to employment vary widely across individuals and communities, the traditional view of transition as a special linking service between school and adult opportunities is insufficient. The present definition emphasizes the shared responsibility of all involved parties for transition success, and extends beyond traditional notions of service coordination to address the quality and appropriateness of each service area.

## Underlying Assumptions

Three assumptions underly OSERS programming for transition. Stating these at the outset should clarify basic policy positions.

## Complexity of Post School Services

Public and private schools provide a range of services for students with disabilities in a relatively organized fashion. While the upper and lower ages for these services vary from state to state, the comprehensive nature of the services organized and, in many cases, funded by the schools is relatively consistent. Upon leaving the schools, however, individuals enter into a world where there is competition for scarce employment opportunities, an array of service providers and funding agencies, and differing eligibility requirements. The OSERS program assumes that students in transition from school are leaving a somewhat organized provider system and entering a more complex and confusing world, not fully understood by most service professionals, much less parents or consumers. This complexity is necessary, if adult services are to offer opportunities for normal adult living and working to all individuals with disabilities. Effective transition requires that relevant community opportunities and service combinations be developed to fit individual circumstances and needs.

## Focus on All Students with Disabilities

The second assumption is that OSERS programming for transition should address all citizens with disabilities who leave school for adult services and opportunities. An estimated 250,000 to 300,000 students leave special education each year; no doubt many others graduate from the regular curriculum, but because of a disability, require specialized services to obtain employment. It might be possible to differentiate among the many types and levels

of disability and thereby emphasize the commitment to include all school leavers with disabilities. We have found it more useful, however, to focus on the service needs of these individuals, identifying the kinds of services that will assist the transition of all persons with disabilities from school to working life.

### The Goal of Employment

The final assumption is that sustained employment represents an important outcome of education and transition for all Americans. The goal of OSERS programming for transition is that individuals leaving the school system obtain jobs, either immediately after school or after a period of post-secondary education or vocational services. Employment is a critical aspect of the lives of most adults in our society, whether their work involves highly paid career specializations, entry level jobs, or working in situations where ongoing support services are provided. Paid employment offers opportunities to expand social contacts, contribute to society, demonstrate creativity, and establish an adult identity. The income generated by work creates purchasing power in the community, makes community integration easier, expands the range of available choices, enhances independence, and creates personal status. Of course, this concern with employment does not indicate a lack of interest in other aspects of adult living. Success in social, personal, leisure, and other adult roles enhance opportunities both to obtain employment and to enjoy its benefits.

Equality in employment opportunity has been a consistent goal for achieving participation and integration in the mainstream of American society. Whenever people have held lower aspirations for the work potential of a particular group of citizens, those assumptions have been proven wrong. There has been a long history when it was assumed that women could not enter sustained employment roles in our society. Similarly, there has been the assumption that people who were without sight or hearing or who were in wheelchairs were not capable of employment roles in our society. In each case assumptions of work potential have been discounted as soon as opportunities or proper training became available. OSERS transition program is prepared with the assumption that the goal of sustained employment should not be regarded because of the presence, nature, or extent of a disability. Of course, traditional unsupported employment, in which individuals are expected to function independently of social services, may be difficult for individuals to sustain. For these persons, alternative employment opportunities can be developed that combine work opportunities and ongoing support services.

On employment as a central outcome of education provides an objective measure of transition. The quality of employment that results for individuals can be defined and assessed in the same way as for others, using standard measures of outcomes. One national professional and advocacy group put it this way:

*"The quality of employment and related day and vocational services for individuals with . . . disabilities should be judged by the same criteria used to evaluate the employment of others in our society: income level and the resulting opportunities created by that income; quality of working life, including integration of the work place, safety, and access to challenging work; and security benefits, including job mobility, advancement opportunities, and protection from lifestyle disruptions due to illness or accident" (The Association for Persons with Severe Handicaps, 1983).*

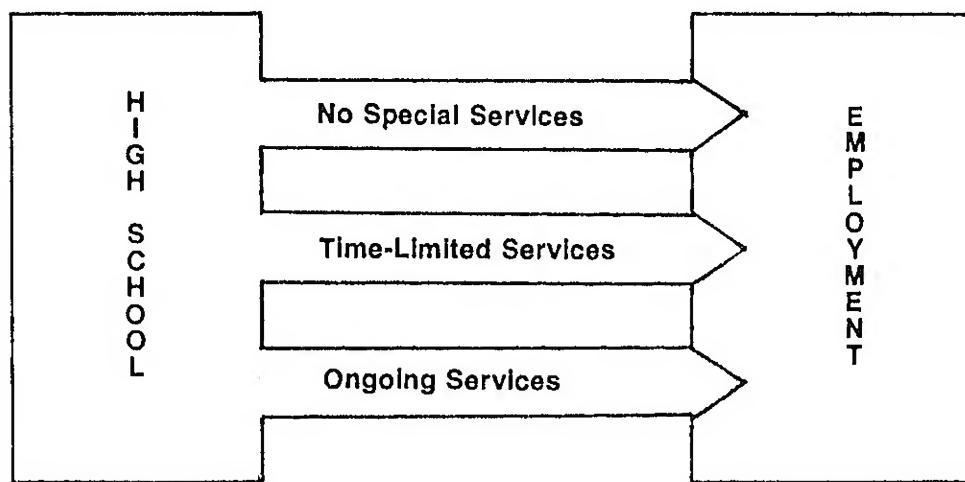
A related index of successful transition is the community integration enjoyed by persons with disabilities leaving school. Regular access to interactions with individuals without identified handicaps and regular use of normal community resources represent important results of the services and opportunities available to each person with a disability. Employment success can contribute to community integration in two ways. First, if the work place itself is integrated, it affords the opportunity for social contacts with coworkers, customers, or supervisors during work breaks and, in some jobs, throughout the day. Second, the income generated by work provides the purchasing power that is necessary for integration into much of a community's commercial, social, and recreational life.

### The OSERS View of Transition

A conceptual framework that describes transition opportunities is needed if public efforts to help individuals with disabilities move from school to working life are to be well planned, coordinated across agencies, and evaluated responsibly. Programming for transition involves using different kinds and amounts of support with different individuals, so that each has the opportunity to work and enjoy the lifestyle benefits of working. There is a nearly infinite set of services and experiences that could lead successfully from school to work for some individuals. Naturally, distinctions must be made among these. In order to reflect important differences in policy, authority, and practice among the many public agencies that can be involved in transition services.

For practical purposes, transition services can be grouped into three classes that reflect the nature of public services used to provide support as the passage is completed. The first involves movement from school either without services or with only those that are available to the population at large; the second involves use of time-limited services that are designed to lead to independent employment at the termination of service; and the third involves use of ongoing services for those disabled individuals who do not move to unsupported work roles. Each of these three transition strategies, or bridges from school to work, is necessary if all individuals with disabilities are to move successfully to working roles. Together with the foundations provided by the secondary school and employment opportunities, these bridges form a five-part model of the transition process that underlies OSERS programming. The model is illustrated in Figure 1 and described briefly below.

**Figure 1. Major Components of the Transition Process**



### **The High School Foundation**

Secondary special education, in concert with vocational education and other school-based services, provides the foundation in skills, attitudes, personal relationships, and often, employer contacts that determines much of the success of later transition. Curriculum content in special education and vocational education affects whether or not students leave school with entry level job skills that are marketable in the local community. Organization and location of the high school program often determines the extent to which students with disabilities are experienced in interacting with non-disabled peers and coworkers, and whether or not potential employers have been able to observe their competent performance of community jobs. The instructional procedures used in high school can greatly affect whether curriculum goals are achieved only by the most capable students or by the full range of persons with disabilities. Transition success can also be affected by the support for personal decision-making that is provided in the schools through the school counselor, individual assessment, vocational rehabilitation personnel in the schools, and the individual education plan process. Whether the student goes to college, attends post-secondary education, utilizes rehabilitation services, or needs more extended support, the initiatives of secondary school personnel can and do make a difference in the success of students facing the transition from school to working life.

### **Transition without Special Services**

The first bridge from school to employment is shared by many individuals with disabilities and their non-disabled peers. Individuals making the transition in this way rely on their own resources or those generally available to all citizens, locating and taking advantage of work opportunities without using special disability services. This is not to say special accommodations for the needs of persons with disabilities are not made, but in this pathway these accommodations are incorporated within generic serv-

ices. For example, some individuals obtain employment at the end of high school programs using contacts gained through work experience programs. Others attend post-secondary education institutions and gain skills that lead to more advanced employment options. Still others locate their own employment through family contacts, neighborhood networks, or short-term volunteer jobs. The number of disabled individuals who make their own way from school to employment is unknown, although the size of this group probably varies with job availability, quality of schooling, and access to generic services.

Post-secondary education institutions are a particularly important segment of the generic services that comprise this pathway. Community colleges, vocational and technical schools, and four-year institutions of higher education play important roles in transition of youth without disabilities from school to work. That their potential contribution to those with disabilities is equally as significant has now been shown in many communities.

### **Transition with Time-Limited Services**

The second bridge from school to working life consists of temporary services that lead to employment. After leaving school, individuals following this path use specialized, time-limited services like vocational rehabilitation, post-secondary vocational education, and other job training programs to gain entry into the labor market. The presence of a disability often qualifies an individual for these services or creates special support for participation. For example, many individuals find employment after receiving relatively brief services in rehabilitation facilities. Others receive support to attend specific job training and then obtain employment at the close of the course. Access to such time-limited services is generally restricted to individuals thought capable of making it on their own after services are completed.

Vocational rehabilitation offers perhaps the best known of the time-limited services. Individuals with employment-

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related disabilities qualify for services if there is a reasonable expectation of employment at the close of services. Once accepted the program allows for quite flexible use of funds to provide whatever support is needed by the individual to enter or re-enter the workforce. While there are many cases of quite extended services to individual clients, vocational rehabilitation services are normally terminated after an individual obtains employment or other service objectives.

### Transition with Ongoing Services

The third bridge from school to working life consists of ongoing services that allow individuals with disabilities to take advantage of work opportunities. Unlike the first two alternatives, this bridge represents a fundamental change in much current policy and practice. At present, ongoing adult services are typically designed to be non-vocational, either providing lifelong custodial care or preparing consumers for later vocational services. The lack of significant movement from these programs to rehabilitation and employment, however, has meant that they actually serve as an alternative to work, functionally excluding participants from both work-related services and employment opportunities. Consistent with the assumptions defined earlier, the alternative proposed here is employment, with whatever ongoing support is necessary to maintain that employment. For example, an individual using this bridge from school to working life might leave school and obtain employment as part of a small team of disabled individuals in an electronics manufacturing plant, where the state agency responsible for ongoing services paid for a work supervisor in the company.

Making this pathway a viable transition alternative involves establishing local services and supportive policies that allow combinations of work opportunities and ongoing support. Such "supported employment" programs could occur in a variety of circumstances: in an industry like that mentioned above, where a small group of disabled workers received publicly supported supervision; in dispersed individual placements in a community, with publicly-funded support staff rotating among sites; in a mobile crew that works in community settings; or in a day activity program that operates a business that is small enough to offer full time employment opportunities to participants. In each case, individual participants enjoy the full range of employment benefits above.

and appropriateness of bridging services, successful transition ultimately requires employment opportunities. The probability that any individual will find suitable opportunities may be enhanced by family and neighborhood networks, individual presence and participation in community activities, and job search efforts. The overall percentage of individuals with disabilities who find work may reflect quite different factors, including the overall status of the economy, the extent of job discrimination, and structural unemployment affecting youth, unskilled workers, and other groups. Consequently, programming for transition from school to working life cannot be addressed adequately without simultaneous attention to such labor issues as minimum wage levels, business incentives to offer employment, equal employment opportunity, and efforts to address structural unemployment problems.

### Implications for OSERS Action

The five-part model of the transition process provides a way of organizing activities and plans to improve transition effectiveness. While each component of the model is important if all individuals with disabilities are to be included, the objectives and strategies are different in the five areas. This final section highlights some of the most significant aspects of the OSERS plan in each of the transition components.

To improve the foundation provided in the secondary school, OSERS will rely on a broadly based strategy of research, development, demonstration, and replication that addresses all aspects of high school services. Particular interests include: renewed efforts to develop cooperative programs with vocational education and vocational rehabilitation to serve all students with disabilities; improvement of community-based job training and placement within the school's vocational preparation program; and development of service models for all students that allow regular and frequent contact with non-disabled peers.

One of the most important initiatives in assisting students make the transition without special services relates to post-secondary education. Community colleges and vocational technical schools offer an age-appropriate, integrated context in which youth and young adults with disabilities can expand personal, social, academic, and vocational skills. While emerging post-secondary programs will no doubt address the needs of all disability groups, OSERS is particularly concerned with stimulating research and program development for persons with learning disabilities and other mild educational handicaps.

Improvement of time-limited services has been the focus of most of the previous attention to transition, and much of the earlier work is still useful. Cooperative relationships between special education, vocational rehabilitation, and vocational education can do much to facilitate vocational planning and ensure smooth changes in service responsibility. In addition, innovations in on-site job training and placement programs offer promise of greater

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effectiveness in time-limited services, and strategies will be developed to promote broader use of these approaches.

To improve employment with ongoing support OSERS has developed a new employment initiative which would assist interested states to shift from day activity programs to work alternatives. The program would offer competitive grants to state agencies responsible for ongoing services, providing support for staff training, program development and demonstration, and other start-up activities. States would retain the responsibility for ongoing funding of services as the focus of programming shifts from day care or pre-vocational activities to supported employment.

Efforts to improve employment opportunities will involve cooperative initiatives with other agencies. Of particular concern to OSERS is development of a broader range of incentives for employers who offer jobs to individuals who may require special equipment, building modifications, longer training periods, or other investments.

In addition to initiatives directly related to the five components of the transition model, a few broader research and evaluation issues seem particularly important. First, too little is known about current transition experiences. We can only estimate the number of individuals who make their way into the workforce by each of the three bridges described earlier and the number who remain jobless despite current service efforts. Careful descriptions of the school population and follow-up studies of special education graduates could assist both schools and post-school services plan for transition, establish policies and programs, and evaluate results. A related issue concerns program evaluation strategies. An adequate evaluation of any transition effort should take the entire transition mod-

el into account, for changes in the number of people who use each of the three bridges may well be the most important result of improved transition. For example, little is gained if a time-limited or ongoing service provides employment for individuals who otherwise would have obtained similar jobs on their own. OSERS programming for the transition from school to working life will offer federal leadership to state and local efforts to improve the lives of young adults with disabilities. To improve transition efforts while preserving the discretion of other levels of government, federal activities will focus on disseminating effective practices, providing assistance to states, and building the capacity of the professional community to deliver improved services. Because of the right to education legislation of the last decade, an unprecedented number of students with disabilities are nearing the age for leaving school. Special education for these individuals should lead to higher education, competitive work, or supported employment. It is time that, by working together, we help all citizens with disabilities achieve these outcomes, along with the personal status and community integration that they create.

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<sup>1</sup>This paper is a preliminary statement of policy that will guide the Office of Special Education and Rehabilitative Services in programming for transition. The paper reflects the work of a special task force representing the Office of Special Education Programs, the Rehabilitation Services Administration, and the National Institute of Handicapped Research: Garry McDaniels, Douglas Fenderson, David Henderson, Ed Sontag, Joan Standee, Tom Bellamy, Michael Herrell, Wes Gelgel, Martin Spickler, Carol Inman, Tom Nerney, Fred Sachs, Harvey Hirschi, and Richard Melia. For his assistance in the development of the paper, I want to express particular appreciation to Tom Bellamy.

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## Rural Rehabilitation Technologies

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A call for professional papers has been issued for the International Conference on Rural Rehabilitation Technologies scheduled for October 23-25, 1984, at the University of North Dakota in Grand Forks. The papers should address technological developments, such as farm equipment adaptations, and programs for rural disabled people. Abstracts are due April 20, and the papers that are accepted must be received by August 31. The conference will include the presentation of professional papers, commercial and scientific exhibits, and speakers. Sponsors are the UND Medical Center Rehabilitation Hospital and the UND Engineering Experiment Station, along with other regional, national and international organizations. For further information, contact: ICRRT Headquarters, Box 8103, University Station, Grand Forks, ND 58202, (701) 777-3120.

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# Rehabilitation Act Amendments of 1984

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On February 22, 1984, President Reagan signed Public Law 98-221, the Rehabilitation Act Amendments of 1984, legislation to revise and extend the Rehabilitation Act of 1973 and to extend the Developmental Disability Assistance and Bill of Rights Act.

Specifically, this legislation provides the following:

- Extends the state grant portion of the Rehabilitation Act through fiscal year 1986, at a level of \$1,037.8 billion in fiscal year 1984 with cost-of-living increases for each of the following years. There will be an automatic extension of funding for a fourth year if the program is not reauthorized prior to September 30, 1986. The amount authorized for the entitlement in the fourth year would be the fiscal year 1986 level increased by the Consumer Price Index for all urban consumers in the previous fiscal year.
- Extends all other programs under the act for three more years.
- Establishes a separate authority for the Helen Keller National Center for Deaf-Blind Youth and Adults. The Center has previously received funding under the Rehabilitation Services Special Projects program.
- Establishes the National Council on the Handicapped as an independent agency within the Federal government. In addition the National Council is charged with the responsibility of reviewing federal programs for handicapped Americans, assessing disincentives or incentives of those programs which relate to community based services, full integration, and independence and dignity, making recommendations based on the assessments, and preparing and submitting a report to the President and Congress not later than February 1, 1986.
- Requires the collection of individual client data for the annual report required of the Rehabilitation Services Administration on: age, sex, race, ethnicity, education, type of disability, severity of disability, key rehabilitation process dates, earnings before and after services, work status, occupation, cost of services, types of service provided, reasons for closure, types of facilities or agencies which furnished services, and whether each such facility or agency is public or private. The Commissioner shall ensure the confidentiality of the identity of each client.
- The Commissioner also is required to continue collection of information on the expenditure of both state matching and federal funds by State Rehabilitation Agencies for administrative costs, services purchased from both public and private rehabilitation facilities, counseling and placement, and other specific services such as evaluation, total restoration, training, post-employment and maintenance, and the number of services purchased.
- Requires the development of standards for evaluations of existing independent living centers and projects with industry, but specifically does not deny funding for existing programs. Standards must be developed by February 1, 1985, and an evaluation based on those standards completed by February 1, 1986.
- Changes the client assistance program from a demonstration, discretionary program to a formula state grant program authorized at \$6 million in fiscal year 1984, \$6.3 million in fiscal year 1985, and \$6.6 million in fiscal year 1986. In states where there has not previously been a client assistance project, the Governor must place the program in an independent agency. States must have a client assistance program in place by October 1, 1984, as a condition of eligibility for vocational rehabilitation state grants.
- Provides the Director of the National Institute of Handicapped Research with the authority to test new concepts and innovative ideas, to allow grants to research and training centers to include faculty support for teaching of rehabilitation related courses, and to clarify that research and training centers can include both centers dealing with multiple disabilities and centers focusing on one disability.
- Continues the authorization for the Architectural and Transportation Barriers Compliance Board for three years.
- Extends the Developmental Disabilities Assistance and Bill of Rights Act and increases the authorization for fiscal year 1984 for its four programs to \$64.2 million to be distributed as follows: Protection and Advocacy of Individual Rights, \$6,400,000; University Affiliated Facilities, \$7,800,000; Grants for Planning and the Provision of Services, \$45,400,000; and Special Projects, \$2,600,000.

# Additional National Information Sources

The following is a list of national information resources that have come to the attention of the Clearinghouse since the publication of our *Directory of National Information Sources on Handicapping Conditions and Related Services* in August 1982. Program annotations follow the same format as the *Directory* and may be used as a supplement to it.

The *Directory* is presently available for \$8 from the Superintendent of Documents, U.S. Government Printing Office, Washington, DC 20402. When ordering, please reference Stock Number 065-000-00142-0.

## Advocacy, Consumer, Voluntary Health Organizations:

**Avenues: A National Support Group for Arthrogryposis Multiplex Congenita**  
5430 East Harbor Heights Drive  
Port Orchard, WA 98366  
(206) 871-5057

*Handicapping Conditions Served:* Arthrogryposis Multiplex Congenita.

*The Organization:* Avenues is a nonprofit organization established in 1980 to share information concerning this condition—which involves a general lack of muscle development and contracture and deformity of joints—with families, therapists, doctors, and other allied health professionals.

*Information Services:* Through a biannual newsletter Avenues disseminates information on current research, assistive devices, recreational programs, and other topics. The organization also refers parents to local sources of service, and if possible, puts them in touch with other parents of children with this condition in their locality.

**Disability Rights Education and Defense Fund, Inc. (DREDF)**  
2032 San Pablo Avenue  
Berkeley, CA 94702  
(415) 644-2555 (Voice)  
(415) 644-2629 (TDD)

*Handicapping Conditions Served:* All handicaps.

*The Organization:* DREDF, founded in 1979, is a national nonprofit organization run primarily by disabled persons to achieve the goals of the disability rights movement. It monitors legislative and educational efforts and conducts training and research programs. DREDF has been very active in the training of disabled persons and their families in the application of their rights under Section 504 of the Rehabilitation Act of 1973. Recently it organized a national effort to prevent deregulation of Section 504. DREDF conducted a study on the educational experiences of disabled females. More than 185,000 disabled women, girls and their parents were contacted to ascertain the level of treatment in education, employment, health, and social services. An executive summary of the study is available free of charge from the above address.

**Information Services:** DREDF offers the most concise and up-to-date information on civil rights of disabled persons to attorneys, federal agencies, legislators and their staffs. The *Disability Rights Review*, the organization's free quarterly newsletter, reports on legislative and judicial activities affecting disability rights. The review is distributed to disabled people, parents, concerned organizations, attorneys and legislators.

**The Family Survival Project (FSP)**  
1736 Divisadero Street  
San Francisco, CA 94115  
(415) 921-5400

*Handicapping Conditions Served:* Adults with chronic brain disorder.

*The Organization:* The Family Survival Project is a nonprofit organization founded to assist families of adults who have been stricken with chronic or progressive brain disorders (stroke, head-injury, Alzheimer's disease, senile dementia, etc.). Its goals include public advocacy for those suffering financial and emotional distress, direct services to families (mostly in California), and the national distribution of information on the care of brain-damaged persons. Through its publications and national conferences, the FSP coordinates and provides specialized training for professionals, primary care givers, and other interested persons to help them understand current research activities and treatment approaches.

*Information Services:* Information for families and professionals is available on FSP study results, workshop materials, and on adult brain disorders. Available publications include *Family Survival Handbook: A Guide to the Financial, Legal, and Social Problems of Brain-Damaged Adults*, single copies free; and *FSP Training Packet: Learning to Survive*, \$12 to families, \$20 to professionals. This packet provides a comprehensive discussion of the various medical, psychological, social, financial, and other factors affecting the brain-damaged person.

Information about new training activities, new publications, and other services is contained in *Update*, the FSP's quarterly newsletter. The FSP offers training workshops on patient management, diagnosis and treatment, long-term care, legal and financial issues, and other topics upon request on a fee basis.

The Project also maintains a speaker's bureau for media interviews, community groups, public hearings, etc. Technical assistance in establishing support groups, developing programs, and writing social policy is available to groups and organizations on a fee basis.

**National Foundation for Ectodermal Dysplasias**  
108 North First Street, Suite 311  
Mascoutah, IL 62258  
(618) 568-2020

*Handicapping Conditions Served:* Persons with various forms of ectodermal dysplasias.

*The Organization:* Ectodermal dysplasia (ED) is a genetic birth defect which embodies a small group of diseases, the best known of which is Christ-Siemens-Touraine's Syndrome. These conditions involve abnormalities of the skin. Symptoms may include lack of sweat glands, skin oils, hair, and problems with the ears, eyes, or teeth. There is no known test to determine the carriers of this condition.

The Foundation was formed to locate families with these conditions and to provide them with whatever support and information they require. It also works to educate the medical community with information helpful in treating an ED patient. It also assists in locating treatment facilities, providing genetic counseling when appropriate, securing nutritional guidance, and lobbying for change in current insurance practices.

*Information Services:* The Foundation presently responds to inquiries from families of persons with ED and is developing a publications program.

**National Stroke Association (NSA)**  
C/O The Medical Care and Research Foundation  
1565 Clarkson Street  
Denver, CO 80218  
(303) 831-0267

*Handicapping Conditions Served:* Stroke patients and their families.

*The Organization:* The NSA is dedicated to serving stroke victims and their families. Through its membership, the NSA has established a national network committed to improving life after stroke. Membership is comprised of lay and professional persons.

*Information Services:* This Association publishes a quarterly newsletter as a tool for exchanging stroke-related experiences and other information. All NSA members receive this publication, which contains articles from practitioners, researchers, stroke patients, and family members.

The NSA has established a stroke information clearinghouse which is collecting a broad range of stroke information and data on available services. The Clearinghouse is developing a *Stroke Resource Catalog* and is collecting audiovisual materials for loan to interested groups. In addition, inquirers are referred to local services and support groups when appropriate.

**Parents of Premature and High-Risk Infants, Inc. (PPHRI)**  
The Graduate School and University Center of the City University of New York  
33 West 42nd Street  
New York, NY 10036  
(212) 840-1259

*Handicapping Conditions Served:* Handicaps resulting from premature birth.

*The Organization:* This organization was established in 1982 by a group of parents and professionals to provide a national focal point for information, referral, and support for families of infants who require special care at birth. With support from Premature, Inc., the National Self-Help Clearinghouse, and the Gerber Baby Food Fund, the organization is developing a national clearing house on this subject.

*Information Services:* PPHRI publishes a quarterly newsletter, *Support Lines*, which is available for \$5 from Premature, Inc., 10200 Old Katy Road, Suite 100, Houston, TX 77043. It also publishes a *Resource Directory* which is available for \$3.50 from the New York office. This book lists support groups throughout the country, and reviews books and other materials in this field.

*Information Genesis*, the bimonthly magazine published by the National Lamaze Child-Birth Society, developed a special issue on premature and high-risk infants. It is available for \$2 from High-Risk, Genesis, ASPO/Lamaze, P.O. Box 33429,

Farragut Station, Washington, DC 20033, (703) 524-7802.

The organization is presently developing a parent support group packet and a volunteer training packet.

**The Pride Foundation (Promote Real Independence for the Disabled and Elderly)**  
1159 Poquonock Road  
Groton, CT 06340  
(203) 447-7433 or (800) 962-0707

*Handicapping Conditions Served:* Persons with physical disabilities.

*The Organization:* The Pride Foundation is a nonprofit organization whose primary objective is to provide assistance for the handicapped and elderly in the areas of home-making, independence in dressing, and personal grooming.

*Information Services:* For a fee, Pride provides technical assistance to health agencies, social service groups, and voluntary organizations in the areas of clothing design and other home-making skills. Direct services to disabled and elderly persons and their families include sewing assistance, adapting patterns and designs to meet the clothing needs of persons with specific disabilities, training in sewing machine operation, and the provision of household devices for use in the kitchen, bedroom and bathroom. Many of these services are offered through the mail.

Pride makes available a clothing exhibit, "The Travel Trunk," for a rental fee of \$50. This exhibit contains approximately 150 sample garments, which have been especially designed for persons with various disabling conditions.

The Foundation also disseminates a number of publications which include curriculum guide for advanced inservice training for homemaker/home-health-aides, sewing instruction manuals, pattern design and clothing modification manuals, and other materials designed to teach the disabled homemaker or service provider.

**Tuberous Sclerosis Association of America (TSAA)**  
P.O. Box 44  
Rockland, MA 02370  
(617) 878-5528

*Handicapping Conditions Served:* Persons with tuberous sclerosis.

*The Organization:* The TSAA is a nonprofit organization of patients, parents, physicians, and other interested persons. TS is a genetic disease with no known cause or cure. The disease is generally characterized by one or more of the following symptoms, which may range from mild to severe: convulsive seizures, mental retardation, white skin spots, tumors, physical disabilities, and a characteristic skin rash. The Association estimates that one in 10,000 persons suffers some form of this condition. Treatment is directed toward relieving symptoms.

*Information Services:* The Association offers medical information to patients and families at no charge upon request. TSAA also publishes a bimonthly newsletter which provides current information on medical progress, legislation, children with TS needing adoption, and other information.

**United Together**  
348 Haworth Hall  
Lawrence, KS 66045  
(913) 864-4950

*Handicapping Conditions Served:* All handicaps.

*The Organization:* United Together was formed in March 1980

as the result of a meeting of disabled advocates, many of them developmentally disabled, who felt that there was no national organization representing their needs. The objectives of the organization include: working to assist in legislative change, increased employment of disabled persons, and public awareness. Membership costs \$5 per year.

**Information Services:** The organization publishes a newsletter, the *UT Quarterly*, which provides information on the organization, its activities, and its members. United Together also makes available two publications on self-advocacy, *How to Work with the System and When* (\$2), and *Evaluation: Every Person's Right* (\$2). These books are written in simple language, large type, and cartoon characters to increase comprehension of the content for those individuals who have difficulty reading.

## Professional Organizations

**Alternative Living Managers Association (ALMA)**  
1642 North Winchester Avenue, Suite 100  
Chicago, IL 60622  
(312) 276-3176

**Handicapping Conditions Served:** Persons with developmental disabilities.

**The Organization:** The ALMA was recently formed to provide a network for information sharing among managers of small community-based residences for developmentally disabled individuals.

**Information Services:** Its main dissemination vehicle is the quarterly newsletter, *ALMA Matters*. Included in the newsletter are legislative updates, management principles, reviews of books and program materials.

**American Association of Diabetes Educators (AADE)**  
North Woodbury Road, Box 56  
Pitman, NJ 08071  
(609) 589-4831

**Handicapping Conditions Served:** Diabetes.

**The Organization:** The AADE is a nonprofit organization founded in 1974 to promote the growth of quality diabetes education for the diabetic consumer in the United States.

**Information Services:** Publications include a quarterly journal, *The Diabetes Educator*, a bimonthly newsletter which discusses organizational activities and special events, and other materials such as *National Community Resource Guidelines for Diabetes Educators* and *Guidelines for Evaluation: A Diabetes Education Program*. Price lists and descriptions of various memberships offered by the AADE are available upon request.

**American Disability Evaluation Research Institute (ADERI)**  
P.O. Box 7735  
Ann Arbor, MI 48107  
(313) 665-9531

**Handicapping Conditions Served:** Persons with physical disabilities.

**The Organization:** ADERI was chartered in 1981 to assist in meeting the research and information needs of persons involved in processing disability claims. Under grants and contracts, ADERI sponsors research to determine the most effective techniques and equipment for use by practicing physicians for evaluating the scope and effect of disabling conditions as

they relate to job requirements. It also conducts studies of disability epidemiology covering such areas as historical reviews of state and federal programs, job risk assessment, rehabilitation program assessment, the medical/legal interface, and guidelines for determining work capacity and disability status.

ADERI's affiliate, the National Association of Disability Evaluating Physicians (NADEP), located at the same address, was organized to serve the specific needs of physicians who are requested to perform medical examinations of persons filing various types of work disability claims. Its objectives which are similar to those of ADERI, are to establish recognition and support for this medical responsibility. Membership in NADEP is open to all physicians for an annual fee of \$150.

**Information Services:** ADERI/NADEP sponsors conferences, workshops, and seminars nationwide on such topics as the medical and legal aspects of disability, quantification of work capacity, guidelines for determining disability or work ability for specific conditions, and how to serve as an expert witness.

Information seminars are also held for other professionals involved with the disability claims process: lawyers, employers, unions, insurance investigators, vocational rehabilitation.

**American Paralysis Association (APA)**  
4100 Spring Valley Road, Suite 104  
Dallas, TX 75234  
(800) 527-0321

**Handicapping Conditions Served:** Paralysis due to spinal-cord injury.

**The Organization:** This organization came into being through a merging of the International Spinal-Cord Injury Research Foundation and the Paralysis Cure Research Foundation in 1982. The founders believed that there was a need for a private nationwide organization to support research into spinal-cord injury.

The organization provides funds and information to researchers seeking a cure for paralysis caused by spinal-cord injury.

**Information Services:** The APA publishes a quarterly newsletter, *Progress In Research*, which is sent at no charge upon request. This newsletter reports on the latest Association-sponsored research. In addition, the APA sponsors a number of "doctor to doctor" information-sharing workshops in various regions throughout the country.

Through its toll-free number, the APA refers patients to local rehabilitation and other programs that offer various types of assistance.

Researchers seeking information on available Association funds should contact Admiral M.D. Van Orden, Vice President of Research, American Paralysis Association, 7655 Old Springhouse Road, McLean, VA 22102.

**American Society of Handicapped Physicians**  
137 Main Street  
Grambling, LA 71245

**Handicapping Conditions Served:** All handicaps.

**The Organization:** This organization was established to assist the estimated 18,000 disabled physicians. Its goals include: promote unity, understanding and camaraderie among handicapped physicians and their families, advocate for political and legislative action in medicine, government, and education, pro-

vide education and supportive services during the rehabilitation process of the disabled physician, and educate society through media exposure regarding the capabilities of handicapped persons in the medical field.

Membership in this organization has grown rapidly since it came into being in 1982 and includes physicians in 46 states and a number of foreign countries. All age groups, medical specialties, and disabilities are represented.

**Information Services:** The Society publishes a quarterly newsletter, *Synapse*, and holds annual national conferences. Eventually the Organization hopes to serve as a national clearinghouse for information on the varied needs and concerns of handicapped medical professionals.

**Association of Rehabilitation Programs  
In Data Processing (ARPDP)**  
P.O. Box 2404  
Gaithersburg, MD 20879

**Handicapping Conditions Served:** Persons with severe disabilities.

**The Organization:** The ARPDP represents 26 programs across the country which train severely handicapped individuals as computer programmers. Graduates of these programs are placed in competitive employment. As of December 1982, 715 out of 893 students were successfully placed.

**Information Services:** The Association responds to inquiries concerning the specific needs of disabled programmers. Persons desiring detailed information are referred to the training program nearest to them.

**International Association of  
Psycho-Social Rehabilitation Services (IAPSRS)**  
11101 Magnolia Drive  
Cleveland, OH 44106  
(216) 721-3030

**Handicapping Conditions Served:** Persons with psychiatric disabilities.

**The Organization:** This organization was established in 1975 in response to the increasing recognition of the need to upgrade community-oriented services for the psychiatrically disabled. As the community mental health center movement has gathered increased momentum, the importance of insuring adequate psycho-social rehabilitation services has assumed greater priority among planners, administrators, and service providers. The organization undertakes to establish improved relations among all levels of personnel active in this

infants.

**The Organization:** The Center was established by leaders in the fields of pediatrics research, and clinical practice, child development and related disciplines to improve and support professional initiatives in infant mental health and development. It accomplishes these goals through its programs: fellowships, training conferences for professionals, liaison with other child-related private and government agencies.

**Information Services:** The Center publishes a newsletter, *Zero to Three*, five times a year, which covers topics of interest to persons in the medical and psychiatric professions. The Center also publishes booklength documents, *Clinical Infant Reports*, in specific subject areas.

**National Council of Independent Living Programs**  
C/O Paraquad  
4397 Laclede Avenue  
St. Louis, MO 63108  
(314) 531-3050

**Handicapping Conditions Served:** All handicaps.

**The Organization:** This Council was established in 1982 by a group of Independent living center directors to form a national information network for professionals working in the independent living field.

**Information Services:** Information is dispensed to members through Council representatives in each of the ten federal regions. As needed, the Council issues a newsletter, *Alerts*, which covers such topics as fund raising, program management, service delivery, advocacy, and pending legislation. In addition, the Council holds annual meetings at which it conducts training workshops for members in a variety of subject areas.

## Information/Data Banks/Research

**EduTech**  
JWK International  
7617 Little River Turnpike  
Annandale, VA 22003  
(703) 750-0500

**Handicapping Conditions Served:** All handicaps.

**The Organization:** Project EduTech, funded by the Special Education Programs office of the Department of Education, is designed to provide technical assistance to state and local education agencies, educators, and other persons interested in the appropriate use of technology in special education. The Project develops reports and other information on technological advances, and maintains an information base in related areas.

**Information Services:** EduTech's files contain information on technology, special education issues, companies/vendors, active projects, resource organizations, and funding sources involved in technological development. This material is periodically organized into topical bibliographies, resource guides, and fact sheets, which are used to respond to inquiries.

Some of the materials produced by EduTech include: *Selection of Micro-Computers; Assistive/Communication Devices; Television Applications in Education; Technology in Special Education Instruction; and Software*. The Project also maintains an ongoing bulletin board on SpecialNet, a national computerized information network for special education personnel. SpecialNet subscribers may access this file.

**National Adoption Exchange**  
1218 Chestnut Street  
Philadelphia, PA 19107  
(215) 925-0200

*Handicapping Conditions Served:* Children with developmental disabilities and social and environmental deprivation.

*The Organization:* Under a federal grant from the Office of Human Development Services of the Department of Health and Human Services, the National Adoption Exchange was established in 1982 to provide a national focal point for the dissemination of information about children with special needs who are available for adoption. These children include those with developmental disabilities and other "special needs" children (older, emotionally disturbed, members of minority groups, or groups of siblings wishing to be adopted together). The Exchange does not determine where children will be placed, but works in cooperation with adoption agencies on the children's behalf. Many of these children presently reside in foster homes, group homes, or other institutions. The Federal Government estimates that there are presently 50,000 "legally free" children needing homes.

*Information Services:* The Exchange publishes a quarterly newsletter, available at no charge. It also produces a book which contains photographs and descriptions of many of the children around the country awaiting adoption. The book, with periodic updates, is available for \$35. The Exchange also produces a film, "The Challenge of Caring," which offers a 30-minute presentation on adoption of special needs children. Interested groups may borrow or purchase the film from the Exchange.

The Exchange welcomes inquiries from people who want to know more about adoption, and in particular, from families interested in exploring the possibility of adopting a special needs child.

**National Council on Family Relations (NCFR)**  
1219 University Avenue, Southeast  
Minneapolis, MN 55414  
(612) 331-2774

*Handicapping Conditions Served:* All handicaps.

*The Organization:* The NCFR is an international nonprofit educational and resource organization dedicated to the strengthening of the family. The goal of the Council is to assist professionals in developing professional standards in the field. The membership of the Council is comprised of researchers, clinical practitioners in family therapy, and professionals in related disciplines.

*Information Services:* The main information component of the Council is the Family Resource and Referral Center (FRRC).

This Center produces the Family Resources Database, which is available for on-line searching through BRS and DIALOGUE, two national database vendors. The data base contains approximately 55,000 citations of books, journal articles, government documents, resource organizations, instructional materials, audiovisual materials, and a listing of community services which are concerned with the functioning of the family.

The database comprises numerous citations of materials concerned with various disabling conditions as they relate to family interaction. A search of the database (May 1983) yielded the following: families with handicapped persons (physical handicaps), 1369 citations; families with mental retardation, 844 citations; families with learning disabled members, 421 citations; families with emotionally disturbed, 779; and families

with schizophrenia, 60 citations.

Besides the bibliographic files, the database contains a Human Resource Bank, which contains the vitae of hundreds of specialists working in the field who have expressed a willingness to provide consultation to lay and professional individuals when appropriate. In addition, a Work In Progress File lists ongoing research and demonstration projects. Both government and private-sector funded projects are included.

Nonsubscribers to BRS and DIALOGUE who wish to search the database should contact local college and university libraries, many of which provide searching assistance, or if local search facilities cannot be found, FRRC staff will conduct custom searches on a cost-reimbursement basis.

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## Final Rules Protecting Infants

On January 12, the Department of Health and Human Services (HHS) published in the *Federal Register*, page 1622, final rules effective in 30 days to protect the civil rights of handicapped infants.

The rules were issued under the authority of section 504 of the Rehabilitation Act of 1973, which "prohibits discrimination on the basis of handicap in programs and activities receiving Federal financial assistance." These final rules continue the Department's efforts to put in place an effective mechanism for enforcing section 504 in connection with health care for handicapped infants.

Proposed rules had been published in the July 5, 1983 *Federal Register*. The final rules are based on the 16,739 comments received, of which 97.5 percent supported the rules. The major elements of the rules are:

- Encourage hospitals to establish review procedures concerning life and death decisions affecting seriously ill newborns. The rules include a model Infant Care Review Committee to assist hospitals in this effort. The committee would be made up of persons with a wide range of perspectives which should include a practicing physician and nurse, a disability representative, a lawyer, clergymen, and other individuals with expertise in the area.
- Require the posting in hospitals of an informational notice regarding the legal rights of handicapped infants. The notice requirements have been revised to permit hospitals to highlight their own policies and internal review procedures, in addition to the federal law and government contact points.
- Set forth interpretative guidelines requiring that health care providers not withhold nourishment or medically beneficial treatment from a handicapped infant solely on the basis of present or anticipated physical or mental impairments, but it does not interfere with reasonable medical judgments, nor require the provision of futile treatments.

(See *Infant Protection*, page 24)

# New Sources of Disability Statistics

By Inez Marie Fitzgerald

In recent months data from several surveys have become available, greatly improving information especially in the area of work disability. The Current Population Survey (CPS) and the 1980 Census give us a wealth of information on the work disabled population.

## Current Population Survey

In 1981 the Bureau of the Census began to include questions on disability in the March Current Population Survey (CPS), a monthly survey to measure labor force parti-

pation. In 1982 a random sample of approximately 147,000 noninstitutionalized people, age 16 to 64, was used to determine prevalence of work disability. Work disabled persons were identified through direct questions about disability status and through responses to related questions indicating lack of work activity due to illness or disability, or receipt of Medicare or SSI by those under 64 years of age. Survey results yield an estimate of 13.1 million work disabled persons. The following table gives additional breakdowns (CPS tables are taken from *Labor Force Status and Other Characteristics of Persons with a Work Disability: 1982* by John M. McNeil):

Table A. Prevalence of Work Disability in March 1982—Persons 16 to 64 Years Old, by Selected Characteristics and Sex

(Persons 16 to 64 years old as of March 1982. Numbers in thousands)

Characteristic	Both sexes		Male		Female	
	Total	Percent with a work disability	Total	Percent with a work disability	Total	Percent with a work disability
Total, 16 to 64 years old....	147,306	8.9	71,791	9.3	75,515	8.5
RACE AND SPANISH ORIGIN						
White.....	127,071	8.4	62,463	9.0	64,608	7.8
Black.....	16,490	13.4	7,504	12.9	8,985	13.9
Spanish origin <sup>1</sup> .....	8,688	8.0	4,169	7.5	4,519	8.5
AGE						
16 to 24 years.....	37,011	3.3	18,338	3.4	18,674	3.1
25 to 34 years.....	38,703	5.0	19,090	5.4	19,613	4.7
35 to 44 years.....	27,400	7.1	13,404	7.4	13,996	6.8
45 to 54 years.....	22,321	12.3	10,761	12.8	11,561	11.7
55 to 64 years.....	21,870	24.1	10,198	26.2	11,672	22.3
YEARS OF SCHOOL COMPLETED						
Total, 25 to 64 years old....	110,294	10.8	53,453	11.4	56,841	10.2
Elementary: Less than 8 years....	6,466	31.0	3,339	29.9	3,126	32.3
8 years.....	4,944	22.5	2,488	22.0	2,456	23.0
High school: 1 to 3 years.....	13,839	17.0	6,336	17.8	7,503	16.3
4 years.....	44,882	9.0	19,413	10.1	25,468	8.1
College: 1 to 3 years.....	18,445	7.6	9,125	8.7	9,320	6.4
4 years or more.....	21,718	4.6	12,751	5.1	8,968	4.0

<sup>1</sup>Persons of Spanish origin may be of any race.

The association between disability and age is noteworthy. The percentage of work disabled persons between 55 and 64 is double the percentage for those aged 45 to 54. For reasons that may be complex, persons with few years of schooling are more likely to be work disabled. A low level of education may lead to employment in high risk jobs, and severe impairment may make it more difficult to attend school. As McNeil points out, it is possible

that a set of factors such as economic deprivation in childhood may lead to both low educational attainment and increased likelihood of disability.

The CPS shows that work disabled persons have a much lower participation in the labor force than non-work disabled persons, as the following chart shows:

Table C. Labor Force Participation Rates in March 1982—Persons 16 to 64 Years Old, by Work Disability Status, Selected Characteristics, and Sex

Characteristic	Male		Female	
	With a work disability	With no work disability	With a work disability	With no work disability
Total, 16 to 64 years old.....	41.5	88.8	23.7	64.3
<b>RACE AND SPANISH ORIGIN</b>				
White.....	44.4	89.7	24.6	64.2
Black.....	25.6	82.4	19.8	65.4
Spanish origin <sup>1</sup> .....	41.7	88.2	16.9	54.9
<b>AGE</b>				
16 to 24 years.....	41.8	71.1	41.1	59.8
25 to 34 years.....	59.7	96.4	40.5	69.4
35 to 44 years.....	56.3	98.3	30.7	70.5
45 to 54 years.....	44.2	97.4	21.6	67.0
55 to 64 years.....	27.8	85.8	12.4	50.5
<b>YEARS OF SCHOOL COMPLETED</b>				
Total, 25 to 64 years old.....	41.5	95.4	22.0	65.8
Elementary: Less than 8 years.....	19.7	93.1	9.7	46.6
8 years.....	24.7	90.7	13.2	49.3
High school: 1 to 3 years.....	33.2	94.3	17.3	55.7
4 years.....	48.2	95.5	24.9	65.7
College: 1 to 3 years.....	53.2	95.5	34.0	70.8
4 years or more.....	69.6	96.8	49.1	76.9

<sup>1</sup>Persons of Spanish origin may be of any race.

Table D. Unemployment Rates in March 1982—Persons 16 to 64 Years Old, by Work Disability Status, Selected Characteristics, and Sex

Characteristic	Male		Female	
	With a work disability	With no work disability	With a work disability	With no work disability
Total, 16 to 64 years old.....	16.9	10.2	18.3	
<b>RACE AND SPANISH ORIGIN</b>				
White.....	15.9	9.1		
Black.....	26.4	20.5		
Spanish origin <sup>1</sup> .....	24.1	13.0		
<b>AGE</b>				
16 to 24 years.....	30.9	19.9		
25 to 34 years.....	23.3	10.1		
35 to 44 years.....	20.4	6.4		
45 to 54 years.....	12.9	5.3		
55 to 64 years.....	7.3	5.7		
<b>YEARS OF SCHOOL COMPLETED</b>				
Total, 25 to 64 years old.....	15.4	7.5		
Elementary: Less than 8 years.....	20.2	13.5		
8 years.....	11.9	11.1		
High school: 1 to 3 years.....	16.8	12.4		
4 years.....	17.6	8.8		
College: 1 to 3 years.....	13.8	6.4		
4 years or more.....	10.3	2.6		

<sup>1</sup>Persons of Spanish origin may be of any race.

There are differences in occupations of work disabled and non-work disabled persons. Men with a work disability are less likely to be employed in professional and technical positions. Work disabled women are less represented in professional and technical and clerical occupations, and more heavily represented in service jobs.

Work-disabled men had lower 1981 earnings (an average of \$13,863) than those with no work disability, who earned an average of \$17,481. For work disabled women, average earnings were \$5,835, as opposed to \$8,470 for non-work disabled women. Some of the differences can be attributed to the hours worked, since work disabled persons are more likely to work less than full-time year-round.

There is a greater likelihood for work disabled persons to live in poverty—26% as opposed to 10% for non-work disabled persons. Work disabled persons also tend to participate more in assistance programs such as Medicaid and food stamps.

Data on the work disability status of persons aged 65 to 74 are also available from the CPS. Prevalence rates are 31.4% for men and 28.4% for women. The employment rate for work disabled men is 8.3%, compared with 28.2% for non-work disabled men. For women the employment rates are 4.9% for work disabled persons and 13.4% for women with no work disability.

The report, *Labor Force Status and Other Characteristics of Persons with a Work Disability: 1982* by John M. McNeil, gives additional information on the CPS methodology and comparability of CPS estimates with those developed by other sources. The publication contains numerous charts with information on family income and mean earnings, and distributions for major occupational groups, pension and health plan coverage, region of residence and residence inside and outside metropolitan areas and central cities, with breakdowns for variables such as sex, age, and race. The report may be ordered for \$4.50 from the Superintendent of Documents, U.S. Government Printing Office, Washington, DC 20402. The Stock No. is 003-001-91542-1.

## 1980 Census

Recent Bureau of the Census analyses have produced additional data on disability from the 1980 U.S. Census. The long survey questionnaire, which contained questions on work disability and public transportation disability, was completed by 41,198,815 individuals.

Out of 144.67 million persons (the total noninstitutionalized population age 16-64), 12.3 million are work disabled, or about 8.5%. Of those reporting a work disability, about 51% (6.3 million) are prevented from working due to this handicap. Those with a public transportation disability number about 2.6 million; it has not yet been determined what percentage of the work disabled population is also disabled with respect to public transportation. There are about 3.6 million persons 65 years and older with a public transportation disability.

Estimates including percentages for men and women, with a breakdown for whites, blacks and Hispanics, are given in the table on page 15.

It is apparent that the disability rate for white men and women is about the same as the national average. Black men and women report work disability more frequently and Hispanic men and women less frequently.

The difference in labor force participation between men and women is noteworthy. Women are nearly twice as likely not to participate in the labor force, even though there is not much difference in rates for men and women prevented from working.

## New Publications

Frank Bowe, while a visiting professor at the University of Arkansas Rehabilitation Research and Training Center, produced a number of publications on disability data, drawn from CPS statistics. *Demography and Disability: A Chartbook for Rehabilitation* offers an overview of CPS findings in the area of work disability. Bowe gives portraits of the "typical" work-age disabled American. For example, the "typical" noninstitutionalized working age disabled American is: male, 50 years of age, a high school graduate, married, not in the labor force, unemployed, and has about \$5,000 in income from all sources in 1980. This type of overview data is given for disabled men, women, blacks, Hispanics, and the nondisabled, along with a summary of other major characteristics of disabled persons and a number of graphs.

Copies of *Demography and Disability: A Chartbook for Rehabilitation* may be ordered for \$4 from the Arkansas Rehabilitation Research and Training Center, Publication Dept., P.O. Box 1358, Hot Springs, AR 71902; (501) 624-4411, ext. 292.

Bowe has also written a series of summaries of Census Bureau data on disabled adults, women, black adults, and Hispanic adults. *Disabled Adults in America* presents detailed information on important characteristics of the noninstitutionalized working age disabled population, including age, marital status, education, residential patterns (geographic distribution in the northeast, north central, south and west regions, and numbers in metropolitan areas), labor force participation, and employment status. The data give compelling evidence that disability acts as a major barrier to employment. This publication also gives a good discussion of the limitations of statistical surveys on disability.

*Disabled Women in America* gives a representation of working age noninstitutionalized disabled women. About one in twelve working age women is disabled (8.5%). Three out of four disabled women are not in the labor force. Only around 20% work, as opposed to nearly 60% of nondisabled women of working age. Only 12% of disabled women work full-time. However, those who do earn nearly as much as nondisabled women. This may be due to the fact that disabled women are around 18 years

## Work Disability Statistics from the 1980 U.S. Census

	With a Work Disability		Not in Labor Force	In Labor Force		Prevented from Working	
	Number	Percentage		Number	Percentage	Number	Percentage
Men	6,379,603	9.0	3,247,100	3,132,503	49.1	2,803,327	4.0
Women	5,939,948	8.0	4,376,105	1,563,843	26.3	3,505,134	4.7
White Men	5,321,170	8.9	2,613,250	2,707,920	50.9	2,253,797	3.8
White Women	4,689,257	7.6	3,431,308	1,257,949	26.8	2,710,087	4.4
Black Men	827,901	11.3	514,859	313,042	37.8	448,331	6.1
Black Women	1,011,797	11.7	766,009	245,788	24.3	649,726	7.5
Spanish Men	313,100	7.2	168,100	145,000	46.3	146,958	3.4
Spanish Women	325,566	7.2	254,006	71,560	22.0	212,128	4.7
<b>Total Populations</b>							
Men: 70,680,243	White Men: 59,973,126	Black Men: 7,295,087	Spanish Men: 4,375,651				
Women: 73,986,389	White Women: 61,812,589	Black Women: 8,642,947	Spanish Women: 4,493,479				

## Health Interview Survey 1981

Number of Persons in Thousands	Visual Impairments	Hearing Impairments	Speech Impairments	Absence of Extremities or Parts of Extremities*	Paralysis, Complete or Partial, of Extremities or Parts of Extremities	Deformities or Orthopedic Impairments
	9,084	18,666	2,166	2,006	1,318	18,416
Rates per 1,000 Persons						
Both Sexes	40.4	82.9	9.6	8.9	5.9	81.8
All Ages						
Male	47.8	91.1	13.8	14.9	7.0	86.4
Female	33.4	75.3	5.7	3.3	4.8	77.6
<i>AGE</i>						
Under 17	9.7	17.7	15.5	1.7	2.5	21.1
17-44	27.4	43.8	7.1	5.6	4.1	90.5
45-64	55.2	142.9	7.9	15.2	6.4	111.7
65 and Over	136.6	283.8	8.6	27.9	19.6	128.2

\*Excludes Tips of Fingers or Toes Only

older, on the average, than nondisabled working age women. The publication contains other comparisons between disabled and nondisabled women, as well as contrasts with disabled men.

A portrait of the black disabled population is given in *Black Adults with Disabilities*. Disability among blacks is much more common than among whites or Hispanics.

One out of every seven working age black adults is disabled (14.1%). There are more black disabled women (53.9% of the total black disabled population) than men (46.1%). Almost 80% of disabled blacks live in cities. Nearly half reside in the South.

As outlined in this publication, only one in every six working age disabled black persons works. This contributes to the low income characteristic of the black disabled adult

population—almost half have incomes below the official poverty line. In addition to data on labor force participation, employment rate, and income, the report gives specific data on age, education, and other variables.

*Disabled Adults of Hispanic Origin* offers an indepth review of people who belong to a minority whose members frequently encounter linguistic barriers in addition to those associated with disability. Persons of Hispanic origin may be of any race. One out of every twelve Hispanic working age adults is disabled. This is about the same as the rate for disability among white people. There are more Hispanic disabled women (53%) than men (47%), reflecting the fact that in the Hispanic population women outnumber men (52% to 48%). Most (82.6%) live in cities. Almost 40% live in the western part of the country, and 30% are in the South. More than one third have incomes below the poverty level. As in the other documents authored by Bowe, there is detailed information on age, marital status, income, labor force participation, and employment rate. Comparisons with whites and blacks are frequently made.

These four publications, *Disabled Adults in America*, *Disabled Women in America*, *Black Adults with Disabilities*, and *Disabled Adults of Hispanic Origin*, will be available in early 1984 from the President's Committee on Employment of the Handicapped, 1111 20th Street, N.W., 6th Floor, Washington, DC 20036, (202) 653-5044.

## 1981 Health Interview Survey

Unpublished data from the 1981 Health Interview Survey, conducted by the National Center for Health Statistics, have recently become available. Prevalence rates for major impairments, listed in the table above, have been developed with specific breakdowns by sex and age group. In comparing data from the 1979 Health Interview Survey with 1981 statistics, we find that disability rates have on the whole increased slightly (although prevalence of disabilities in the "deformities or orthopedic impairments" category has decreased).

## New Employment Initiative Announced

HHS Secretary Margaret M. Heckler recently announced a new departmental initiative which seeks to generate private sector support to place 25,000 developmentally disabled Americans in new jobs by the end of 1984.

"The developmentally disabled have much to offer to an employer, including most of all a strong, positive desire to contribute and succeed in the workplace," Secretary Heckler said in announcing the new HHS efforts. "Employers owe it to themselves to find out more about the capabilities of our developmentally disabled citizens."

Federal efforts will concentrate on disseminating to prospective employers relevant information, exemplary training models and a catalog of the "success stories" of companies and businesses which already employ severely disabled individuals.

Developmentally disabled persons, as defined by law, have severe chronic disabilities manifested early in life. Their disabilities result in limitations in some, but not all, life activities. Professional estimates are that at least 95,000 developmentally disabled persons graduate each year from high school special education and adult vocational education classes, usually without real prospects for jobs and economic independence.

Secretary Heckler cited mounting evidence that the developmentally disabled can become reliable, productive employees in competitive businesses. "In instance after instance," she said, "the developmentally disabled have shown themselves to be conscientious, reliable, productive and loyal employees. Absentee rates are low. And tax incentives for businesses, under the Targeted Jobs Tax Credit Act, can make the hiring of the

developmentally disabled especially desirable."

Jean K. Elder, Ph.D., Commissioner of the Administration on Developmental Disabilities, will direct the department's efforts, which are part of the "Decade of the Disabled" proclaimed by President Reagan last November.

The initiative is already receiving the support of various groups including: the American Association on Mental Deficiency; Association for Retarded Citizens, USA; United Cerebral Palsy; Epilepsy Foundation of America; National Association of Developmental Disabilities Councils; Council of State Administrators on Vocational Rehabilitation; National Association of Rehabilitation Facilities; National Council for Therapy and Rehabilitation through Horticulture; and Goodwill Industries.

Major businesses currently active in hiring developmentally disabled workers include Hyatt Hotels, the Marriott Corporation, Holiday Inns, the Oscar Meyer Corporation, McDonald's and Hewlett-Packard.

The Administration on Developmental Disabilities has published the following: Fact Sheet on Initiative for the Employment of Developmentally Disabled Persons; brochure entitled *Hire Ability: It's Good Business to Hire the Developmentally Disabled*; and a special edition of *Human Development News* (February 1984). These publications and information for employers who seek to provide training and employment opportunities for the developmentally disabled are available from: HHS Employment Initiative, Administration on Developmental Disabilities, Room 348-F HHH Building, Washington, DC 20201, (202) 245-2888.

## South Carolina Opens Computerized I&R

Anyone who has been asked to locate an appropriate service for a disabled person and had to go through a printed directory—if available—or make half a dozen phone calls has been dreaming of a pushbutton service connected with a computer which would do the sifting and matching. Such a dream has become a reality at least in one state: South Carolina.

The South Carolina Handicapped Services Information System (SCHSIS) is a computerized information and referral system that has compiled a data base with details on services available to handicapped citizens in South Carolina. SCHSIS has been a joint endeavor funded by the South Carolina Developmental Disabilities Program and the University Affiliated Facilities program at the University of South Carolina. Information in the system covers services offered by hospitals, private associations, state agencies, voluntary organizations and more. The computer terminal allows updating, adding and changing information in the data base to be accomplished in minutes.

SCHSIS is organized on a county basis. It matches a person needing a service with the service in the county closest to the individual. The inquirer has to tell the system what kind of service is needed in which county, and the computer plays the matchmaker.

The system has the capacity to provide the following information to the user:

- An index of all available health and human services for the handicapped;
- A roster of agencies/programs offering services (the universe is approximately 400);
- A specific description of the service;
- Eligibility criteria or a direct contact person to determine eligibility;
- Location of the service, including address, contact persons, telephone;
- Days and hours of service availability;
- Availability of transportation including public or any other alternative transportation;
- Accessibility of facility and if handicapped parking is provided;
- Name and telephone number of the 504 coordinator for each program;

- Any unique feature of a program;
- Specific information on the central agency program office;
- Enabling legislation (federal or state).

SCHSIS was originally designed to be used by agency/service provider personnel. However, as the system developed, the design expanded to accommodate handicapped persons directly. Consumers can now access the system via a statewide toll-free telephone line. The caller tells the operator in which county he lives and what kind of service he needs. This information is entered into the computer. Within seconds the computer responds with a list of pertinent service providers in that geographic area. Details on the service can be obtained by continuing the dialogue with the computer. The information appears on the computer terminal's video display screen and the operator reads it off to the inquirer.

At present only a few agencies have the capacity to directly access SCHSIS information from their computer terminals. SCHSIS staff currently has the responsibility for updating and maintaining information on all agencies in the system.

SCHSIS has been in operation for 23 months and has been very successful. A grant from the Department of Health and Human Services in Washington will allow SCHSIS to expand on a regional basis outside of South Carolina. By September 1984 eight southeastern states will be able to dial a toll free number and obtain information concerning specialized medical services in the region.

The system is an excellent model that could easily be replicated or adapted for use in other states. The South Carolina Government sees SCHSIS as a useful management tool which can help increase awareness and usage of existing services, point out possible duplications and identify gaps in services. According to its creators, SCHSIS is an innovative program with unlimited potential.

For more information write to: Girish G. Yajnik, Program Administrator, SCHSIS/UAF/USC, Benson Building, Columbia, SC 29208, (803) 777-7574.

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## Employment Problems Of Handicapped Youth

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*Seven Special Kids: Employment Problems of Handicapped Youth* was a study done by R.C. Smith for the Office of Youth Programs, Employment and Training Administration, U.S. Department of Labor. The study charts the vagaries of seven youngsters through the school systems and the rocky transition from school to work. It follows these young people over a number of years and closes by telling us their employment or unemployment status in April 1983.

We get our first look at them in 1977 when the youngest was twelve and the oldest 19. The Education for All Handicapped Children Act had come into being two years earlier and the regulations for Section 504 had just been signed by Secretary Califano. School systems and parents struggled with the brave new world of P.L. 94-142 and it is satisfying to learn that at least the mother of one of the seven kids started to fight and insist on the hard-won rights for her son and that some of the youngsters were moved into the mainstream of school life and got some special help.

The study does not confine itself to what happened to the seven kids, but discusses a whole host of topics: vocational education and what it does but more often does not do for handicapped students; job readiness programs; and the importance of pay for work-study programs and for motivating young people to stay in school. There are examples of programs which work well and the case is made for a close interface of special education, vocational education and vocational rehabilitation.

A good many pages are devoted to the role of the CETA program which, although replaced by the Job Training Partnership Act (JTPA), has important lessons for its successor. It took years for the number of handicapped individuals served by CETA to rise from 5.4 to 9.5 percent in the Adult CETA Program and from 2.4 to 8.6 percent in the CETA Youth Program. One of the reasons for this low participation was that very few CETA programs had on their staff or at immediate disposal anyone capable of assessments of handicapped individuals. Rehabilitation had few linkages with CETA programs. It did not happen again and the JTPA continuation of Vocational Rehabilitation on the county councils to be established in each service area. Many CETA programs were not accessible to handicapped applicants. In spite of all these difficulties, some of the seven young people got their experience and their first paychecks through CETA.

Two of the seven youngsters one thing is loud and clear. The importance of the role of parents cannot be overestimated. The parents' influence on their children, with the schools and with other resources determines the course of their children's lives to a great extent. Some of the parents of the

seven were overprotective, some could not cope, some supported without coddling, some participated in school placement decisions and in the IEP process, and some helped their kids find jobs and knew how to mobilize community and program resources.

The author closes with a list of recommendations for the JTPA program aimed at ensuring that the JTPA programs make better use of community expertise and resources for the disabled than the CETA program, and that handicapped youth get their fair share of opportunities.

Photocopies of the study *Seven Special Kids: Employment Problems of Handicapped Youth* are available at \$20.50 from: National Rehabilitation Information Center, 4407 Eighth Street, N.E., The Catholic University of America, Washington, DC 20017-2299, (202) 635-5822.

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## Physicians and Suppliers Who Accept Medicare

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Secretary Margaret M. Heckler of the Department of Health and Human Services has announced that national directories have been prepared listing physicians and medical suppliers who may accept Medicare rates as full payment for services.

Under Medicare's Part B (medical insurance) program, each participating physician and supplier may accept or not accept the set rates assigned by the Medicare program on a case-by-case basis. When the rate is accepted, the only payment required of the patient is the amount necessary to cover deductibles and co-insurance. When the rate is not accepted, the patient must pay any difference between the bill and the Medicare allowance.

The directories were compiled and will be distributed by the Health Care Financing Administration to let Medicare beneficiaries know which physicians and suppliers in their area may accept what the federal government will pay. Beneficiaries may review the lists of physicians and suppliers at any of the nation's 1,300 Social Security offices, at some 725 state and local agencies on aging, or at the Medicare carriers' offices. Information will also be available by telephoning Medicare carriers or Social Security Teleservice Centers.

The lists will be updated each year, and physicians and suppliers will have the opportunity to correct any erroneous information. Copies will be available free of charge to consumer and health care organizations and they are encouraged to send comments to: Lynn May, Health Care Financing Administration, Room 305H Humphrey Building, 200 Independence Ave., S.W., Washington, DC 20201.

## Footwear Technology

At the invitation of the National Institute of Handicapped Research, 40 clinicians, podiatrists, orthopedists, pedorthotists, engineers, physical therapists, and shoe industry representatives met in Washington on February 5-7 to explore the feasibility of bringing the computer age to the design and manufacture of orthopedic footwear.

There are serious problems in the industry supplying footwear to persons with foot deformities, insensitivity or hypersensitivity of feet. Orthopedic shoemaking is a dying profession, practicing members are aging out, and few people are willing to go through a long learning process without prospects of riches to be earned. Because of the shortage of suppliers present costs for custom-tailored and hand-made orthopedic footwear is in the range of \$500 to \$900. The need for orthopedic shoes to prevent further deterioration of conditions including some which might necessitate amputation is not recognized by Medicare or Medicaid as a medical necessity and therefore the cost is not reimbursable. A small market drives prices up. High prices prevent people from buying needed shoes, often inviting disaster which costs much more to cope with than prevention.

It is not surprising that a hard-pressed industry and its customers look towards technology for relief. The conference explored the present state of the art of computer aided design and manufacture. One of the charges to the conference participants was to select the most promising pieces of equipment which allow three dimensional profiling of feet through a scanning device and match them to computer graphics for modification by clinicians. Once the design is completed the information is converted from analog to digital and connected to computer controlled manufacturing equipment. Lasts, uppers and internal sole contours would be the products of this process.

A second conference of invited participants will take place in Washington, D.C., May 14-16. Participants will go more deeply into the matching of profile devices, computer analysis and computer aided manufacturing. Hopes are high to arrive at a cost effective process to manufacture specialized footwear and there is sufficient commitment in the field to continue the quest if the two initial conferences cannot achieve the goal. Most of us abuse and hurt our feet through a lifetime of wearing not carefully selected and designed footwear. It is not too difficult to envision future benefits of these efforts for all shoe-wearers.

## Accessible Post Offices ... ?

The U.S. Postal Service leases approximately 28,000 buildings, of which the Architectural and Transportation Barriers Compliance Board (ATBCB) estimates 15,000 to 20,000 are inaccessible to handicapped persons.

The 1968 Architectural Barriers Act decreed that "all public buildings constructed in the future by or on behalf of the Federal government are designed and constructed in such a way that they will be accessible to and usable by the physically handicapped." The Postal Service has contended that the law does not apply to leased buildings which must be made accessible only when the buildings are otherwise being altered, and that it is only required to make accessible those portions of buildings that are being altered.

This position has been challenged in court and a U.S. Circuit Court of Appeals panel in California issued a unanimous ruling overturning a lower court's refusal to grant an injunction sought by Mason Rose V. Mr. Rose, a former chairman of ATBCB, had filed a class-action suit to require the Postal Service to make all the buildings it had leased since January 1977 accessible to the handicapped. The handicapped community holds that the private lessor should be requested to do the alterations as a condition of doing business with the Postal Service. In the court case it was also argued that the Rehabilitation Act of 1973 provides an independent basis to require the Postal Service to make its buildings accessible to handicapped individuals.

## New Policy for Hearing Officers

The Education Department has recently announced a change in policy that now allows employees of state education agencies to serve—under certain conditions—as reviewing officers in local disputes over the education of handicapped children.

## News Briefs

### Task Force Recommends Cash, Not Food Stamps

One of the recommendations of a President's Task Force on Food Assistance is that disabled and elderly persons who are eligible for food stamps receive cash benefits in place of the stamps, or that states be allowed to permit SSI recipients to use food stamps to purchase prepared meals.

Because of claims that hunger is widespread in America, the President convened the Task Force to examine the nation's food assistance programs and, if appropriate, to offer recommendations.

The Task Force concluded that "while the elderly and disabled can use food stamps to contribute towards meals in some congregate feeding or 'meals-on-wheels' programs, they cannot take full advantage of food stamps because they are often immobile and have difficulties with shopping and food preparation. Providing cash benefits would give them greater flexibility in obtaining food. Demonstration projects of cash-outs for the elderly show that administrative costs can also be reduced."

The Task Force also recommended the simplification of application procedures that would allow categorical eligibility for all Aid for Dependent Children and Supplemental Security Income households.

### New College Prep Program in New York

New York University (NYU) has recently unveiled a new program to teach basic computer, math and science skills to disabled high school students from New York City. The three-year program, funded by a \$230,000 grant from the Education Department's (ED) Upward Bound program, is intended to improve physically handicapped students' academic performance while they are still in high school, as well as prepare them for college.

Upward Bound, one of ED's Trio programs for disadvantaged students, is aimed at helping the students gain the basic skills they need to get into and stay in college.

In late February, NYU's Metropolitan Center for Educational Research, Development and Training (METRO Center) initiated classes for remedial training and courses for 45 students to improve their technological skills. They will also receive career counseling and college placement help.

The program director, Patricia Ryan, said, "The goal is to have students complete a real college preparatory program in one or two areas."

### Teacher Shortage Reported

Many states are having trouble finding teachers qualified to teach handicapped children, and the worst shortages are in rural areas, according to a survey by the University of Maryland's Institute for the Study of Exceptional Children and Youth. Researchers at the University polled state education officials in all 50 states, the District of Columbia, Guam and Puerto Rico as well as the Bureau of Indian Affairs.

Margaret M. Noel, an education professor at the University, said, "Nationally, the most common shortages are in the areas of speech handicapped, emotionally disturbed, and secondary special education." The report said, "In attempts to circumvent personnel shortages and to stretch dollars and manpower, districts may place pupils with different varieties of mild, moderate, and severe handicaps together in multicategorical groups, with one instructor and perhaps an aide."

The report noted that Federal officials have estimated that 22,000 new special educators will graduate in 1983-84, but "the current rate of attrition among practitioners in the field is 25,000 annually." Some states reported a higher attrition rate among teachers of emotionally disturbed and severely handicapped students.

More than four million students in U.S. schools receive special services because of physical or mental handicaps, including learning disabilities.

### Hearing Officers

*(Continued from page 19)*

receive federal special education funds, Rostetter said, "We expect and, in fact, require the states to administer and enforce the law at arm's length. There are some federal requirements already on the books to monitor complaints and enforce legal obligations, and we expect the states to meet those responsibilities. By further defining impartiality, we allow the states to retain that role."

According to Rostetter, the standards will also apply to state-level hearing officers who are not direct employees of state departments of education.

# Announcements

## AAMD Announces Annual Meeting

The American Association on Mental Deficiency has announced its 108th Annual Meeting to be held on May 27-31, 1984, at the Hyatt Regency Hotel in Minneapolis, MN, for professionals who work with mentally retarded people. Copies of the preliminary program with housing and registration information may be requested from: AAMD, 5101 Wisconsin Ave., N.W., Washington, DC 20016, (800) 424-3688 or (202) 686-5400.

## Hearing Loss In Adulthood

The Gallaudet Research Institute (GRI) in Washington, D.C., has launched a research program aimed at improving the quality of life of individuals who lost their hearing in adulthood. According to the National Center for Health Statistics, about four-fifths of the severely hearing impaired people in the United States lost their hearing in adulthood.

To assist researchers in planning the program, GRI is sponsoring a seminar series during the 1983-84 academic year. Participants in the seminars include researchers, deafened persons, and representatives of organizations and agencies concerned with hearing impaired adults and with older Americans. Because the prevalence of hearing impairment rises sharply with age, the seminars are paying special attention to the characteristics and needs of older Americans.

Dr. Burt Adelman of the Division of Aging, Harvard Medical School, estimates that the population over 65 years of age will double in 50 years. He noted that normal aging causes changes in the body's organ systems and that changes in sensory organs result in a gradual decline in function. However, he feels that mental function does not decline with the normal aging process. According to Adelman, "Deterioration of functional independence is a reliable marker of active, often correctable disease and is not just the result of growing old... If the growing numbers of older people are to be cared for properly, changes are required in the delivery of medical and psycho-social services."

Dr. George L. Maddox of Duke University states that "hearing loss is perhaps the nation's most prevalent impairment. By hampering communication, hearing loss probably contributes to the understimulation of older adults, which can affect physical and mental health and function."

Proceedings of the seminars are expected to be available in late 1984.

## International Self-Advocacy Conference

People First of Washington (State), a self-advocacy organization of people who are developmentally disabled, along with eight other self-advocacy organizations, has announced the International Self-Advocacy Leadership Conference to be held July 23-29, 1984, at the University of Puget Sound in Tacoma. The purpose of the Conference is to bring together self-advocacy leaders to share ideas, information, and self-advocacy organizing plans. Information, registration materials and a Conference Questionnaire are available from: People First of Washington, P.O. Box 381, Tacoma, WA 98401, (206) 272-2811.

## Call for Papers On Cleft Palate

The Fifth International Congress on Cleft Palate and Related Craniofacial Anomalies will be held in Monte Carlo September 2-7, 1985. The meeting will be of interest to practitioners such as plastic, dental pediatric, maxillofacial surgeons, orthodontists, otorhinolaryngologists, speech pathologists, etc. The deadline for submission of papers is August 1984. For further information, contact Dr. Rene Malek, 6, rue Erlanger, 75016 Paris—France. For information on group travel or chartered flights, contact Jane Angelone Graminski, ACPA-ACPEF, 331 Salk Hall, University of Pittsburgh, Pittsburgh, PA 15261, (412) 681-9620.

## International Conference Announced

The Second International Symposium on Design for Disabled Persons will be held in Israel on November 18-23, 1984. The aim of the Symposium is to bring together disabled persons, rehabilitation workers and professional designers, architects and engineers for an interchange of ideas and for reciprocal learning. A special session on "Technical Aids and Information Centers" will be held on November 19. For further information, contact: KENES, Organizers of Congresses and Special Events, Ltd., P.O. Box 50006, Tel Aviv 61500, Israel.

## Announcements

### National Public Awareness Campaign Launched

A national public awareness campaign aimed at changing negative attitudes about handicapped persons, planned by the Disability Rights Education and Defense Fund (DREDF), will include a benefit concert on October 1 by the renowned violinist Itzhak Perlman. Proceeds from the concert will be used to set up a foundation to continue public awareness activities and support organizations run by disabled persons. Perlman will also narrate a television documentary on how disabled people are being integrated into the social, political, and economic mainstream of American life.

DREDF is a national nonprofit organization managed by disabled persons. It was designed to establish and insure the constitutional rights of disabled adults and children through monitoring legislation, conducting research in educational products, and technical assistance.

Cosponsors of the benefit concert are Senators Robert Dole and Lowell Weicker and Representatives Tony Coelho and Claude Pepper, who have a personal interest in disability-related issues. At a campaign kick-off press conference, Senator Dole remarked, "In the process of being integrated, disabled people become a potentially powerful economic force, as they are given opportunities to become independent, productive citizens ... As both a public and private citizen, I would like to underline the fact that this campaign is of great importance to our society as a whole. It is to our benefit to integrate disabled people into all aspects of community life."

Vice President and Mrs. George Bush have agreed to chair a reception at the Kennedy Center in Washington, D.C. following the October 1 concert.

For further information, contact: Barbara Leff, Disability Rights Education and Defense Fund, 1346 Connecticut Avenue, N.W., Washington, DC 20036, (202) 659-4684.

### Assistance to Handicapped Shoppers

Zayre Corporation has announced the release of a new series of brochures to its employees designed to help them assist Zayre customers who may have special needs. The brochures address the special shopping problems encountered by customers who are blind, deaf, or in wheelchairs, and offer helpful tips on how store employees can best assist these customers. The brochures are being distributed to over 25,000 employees in the 23 states where Zayre does business. A limited quantity is available to the general public and interested groups. Single copies of *Assisting Deaf Persons*, *Assisting Blind Persons*, and *Assisting Persons Who Use Wheelchairs* may be ordered without charge from: Zayre Corporation, Consumer Services Department, Office of Consumer and Community Affairs, Framingham, MA 01701.

### Music Program for Physically Handicapped

The Moss Rehabilitation Hospital/Settlement Music School in Philadelphia has introduced a program of music instruction for young people ages 4 to 20 with physical disabilities. The goal of the therapeutic center and the music school is to provide special access to quality music education for the disabled. It also creates a carefully designed, medically controlled framework to make music study therapeutically beneficial as well as culturally enriching.

Individual weekly instruction on woodwind, brass, percussion, keyboard and string instruments is available at three Settlement Music School locations. A special Children's Music Workshop is also available for children not yet ready for individual instruction. Financial assistance for all program services is available.

For further information, contact: Settlement Music School, P.O. Box 25120, Philadelphia, PA 19147, (215) 637-1502.

### "Kids with Canes" A Videotape

"Kids with Canes" is a 35-minute videotape produced by the Nebraska Services for the Visually Impaired. It depicts children as young as five years of age receiving cane travel instruction in a variety of indoor/outdoor settings. Parents of the children also describe their feelings and reactions about their child's increasing independence and mobility.

The videotape is available at cost for sale or rental in VHS, Betamax, 3/4" U-Matic, or a copy will be made for those who send a blank tape. The rental is \$10 for one month, purchase price is \$40, and a copy on a blank tape is \$25. Send check, money order, or purchase order payable to NFB Kids with Canes to: Kids with Canes, 2711 45th Street, Des Moines, IA 50310.

# NEW PUBLICATIONS

## VOCATIONAL EDUCATION

The Vocational Studies Center at the University of Wisconsin-Madison has announced the availability of a number of new products for use in vocational training.

*Tools, Equipment, and Machinery Supplement Adapted for the Vocational Education and Employment of Handicapped People* contains descriptions and illustrations of 283 products modified for use to assist in the vocational education and employment of handicapped people.

*In Support of Caregivers* is a package containing a guide book, filmstrip, and cassette for planning and conducting educational workshops for caregivers of the elderly. It explores the normal caregiver situations, feelings, conflicts, and stresses, and offers hope for people struggling with their role as caregiver.

*It Takes a Wider Circle* is a filmstrip about using vocational assessment and interagency linkages to improve vocational education for handicapped people. It is intended for use by vocational and special educators, employers, vocational rehabilitation, social services, parents, and others.

*Effective Microcomputer Assisted Instruction for the Vocational Education of Special Needs Students* is a manual for persons concerned with vocational and career education of handicapped and disadvantaged youth. The manual contains the actual microcomputer programs, and articles with ideas for using the microcomputer in vocational classes, resource rooms, and prevocational settings.

Further descriptions of the products and prices are available from: Vocational Studies Center, University of Wisconsin-Madison, 964 Educational Sciences Building, 1025 West Johnson Street, Madison, WI 53706, (608) 263-3696.

## RECREATION

*To Be An Olympian* provides short, simply written profiles on famous athletes who overcame great difficulties to become Olympic champions. This illustrated booklet is intended for teachers, coaches, and sports enthusiasts who teach young people about the importance of training and sportsmanship. It was developed by Mrs. Eunice Kennedy Shriver, founder and president of the Special Olympics sports program for mentally retarded children and adults. It is available at \$.50 from: Special Olympics, 1701 K Street, N.W., Suite 203, Washington, DC 20006.

## HEARING IMPAIRMENT

*What Should I Do Now? Problems and Adaptations of the Deafened Adult*, published by the National Academy of Gallaudet College, is designed to aid the deafened adult, friends, and family members in meeting the challenge of adapting to hearing loss. It explains the implications of hearing loss, discusses common emotional reactions to hearing loss, and describes methods by which suitable adaptations can be made. The booklet is available for \$1.25 plus \$.75 postage from: Gallaudet College Press Distribution Office, 800 Florida Avenue, N.E., Washington, DC 20002, (202) 651-5591 (Voice or TDD).

Gallaudet College, a liberal arts college for the deaf in Washington, D.C., has issued its 1984 *Catalog of Publications*. The catalog lists books, audiovisuals and other materials for hearing impaired adults, for deaf children and their parents, and for educators and other professionals. A number of pamphlets are also available in Spanish. The catalog includes several pages of Signed English Materials. For this 45-page catalog or other information, contact: Gallaudet College Press, Distribution Office, 800 Florida Avenue, N.E., Washington, DC 20002, (202) 651-5591 (Voice); (202) 651-5355 (TDD).

## TECHNOLOGY AND DISABILITY

*Technology and Disability II* is a special issue of *Rehabilitation Literature*, the professional journal of the National Easter Seal Society, that deals with the subject of technology and disability. The Nov./Dec. 1983 issue of the journal contains major articles and reports by prominent professionals and consumers in the area of disability-related technology; a commentary on "The New Technological Imperative"; lists of rehabilitation research and training centers, rehabilitation engineering centers, and research/demonstration projects; a 9-page pictorial describing the latest in "New Products" along with other sources of product information; reviews of recent films dealing with rehabilitation technology; and an expanded section of book reviews and abstracts of current literature. Copies of *Technology and Disability II* (Vol. 44, No. 11-12), 88 pages, are available at \$5 from: Rehabilitation Literature, National Easter Seal Society, 2023 W. Ogden Avenue, Chicago, IL 60612, (312) 243-8400.

# NEW PUBLICATIONS

## DEVELOPMENTAL DISABILITIES

*Parent-Professional Partnerships In Developmental Disability Services*, a new book edited by James A. Mulick and Siegfried M. Pueschel, is intended to discuss the working relationship between parents and professionals in developmental disabilities, to examine some of the circumstances that promote cooperation and trust, and to look seriously at the future of services and collaborative child intervention. Development of the book involved two stages. A symposium was organized in late 1981 as a special training project under the auspices of the University Affiliated Program at the Child Development Center, Rhode Island Hospital, and in the second stage, symposium presenters and other authors contributed chapters for the book. Mulick's introduction stresses the importance of collaborative efforts between parents and professionals. The book is divided into four parts: Counseling Perspectives, Services and Service Providers, the Family and the Community, and Societal Perspectives. This 240-page hardcover book is available at \$19.95 from: Academic Guild Publishers, 28 Hurlbut Street, Cambridge, MA 02138.

*Handbook for Job Placement of Mentally Retarded Workers: Training, Opportunities, and Career Areas* by Angeline M. Jacobs, Judith K. Larsen, and Claudette A. Smith is the third edition of the original *Guide to Jobs for the Mentally Retarded Worker* first published in 1960. It is based on a system of job activity elements for mentally retarded people developed for the former U.S. Office of Vocational Rehabilitation. It is a tool for use in job placement of mentally retarded adults who are preparing for independent living and competitive employment. The book describes 158 job profiles arranged in six categories: merchandising, service and office occupations; agriculture, fishing and forestry; skilled trades; and processing and manufacturing occupations. It also suggests an approach for designing an overall job placement program, and is intended for use by training and placement personnel working with mentally retarded persons in public schools, vocational schools, vocational rehabilitation centers and residential facilities, and as a reference for personnel management staff members in business, industry, institutions and corporations. This 335-page hardcover book is available at \$29.95 from: Academic Guild Publishers, 28 Hurlbut Street, Cambridge, MA 02138.

*Innovative Programming for the Aging and Aged Mentally Retarded/Developmentally Disabled Adult*, by Paul Herrera, M.Ed., is intended to create an understanding of what can be expected to happen to mentally retarded adults as they reach later life and describes innovative programs that will increase their quality of life. It was developed for use by organizations interested in setting up meaningful and appropriate programs for older clients in a MR/DD facility. The book defines the nature and needs of the elderly mentally retarded population and provides

the background necessary for understanding the aging process. It also provides the criteria for determining appropriate services and a needs assessment. This 200 page book is available at \$24.95 from: Exploration Press, P.O. Box 705, Akron, OH 44309.

## CHILDHOOD DISABILITIES

A series of twenty-three "Introduction to Your Child" booklets has recently been published in California. The booklets cover disabilities such as Down syndrome, phenylketonuria, mental retardation, cerebral palsy, epilepsy, diabetes, congenital heart disease, hearing impairment, learning disability and others. An order form with price list is available from: Educational Materials Center, Light for the Way—Booklet Series, School of Health, Loma Linda University, Loma Linda, CA 92350.

## Infant Protection

(Continued from page 11)

- Require that state child protective services agencies have established procedures for applying their own state laws protecting children from medical neglect.
- Provides guidelines for HHS investigations of alleged civil rights violations. These guidelines provide for the participation of the hospital Infant Care Review Committees, the avoidance of unnecessary investigations, the involvement of qualified medical consultants, and the protection of confidential information.

The rules are intended to "foster a new process of cooperative efforts and sensible approaches to advance the principle that life and death medical treatment decisions be based on informed judgments of medical benefits and risks, and not on stereotypes and prejudices against handicapped persons."

For further information, contact: Susan Shalhoub, Office for Civil Rights, Department of Health and Human Services, 330 Independence Ave., S.W., Room 5514, Washington, DC 20201; (202) 245-6585 (voice); (202) 472-2916 (TDD).

## New OSERS Telephone Numbers

The new telephone numbers for Federal Assistance Programs listed in the January/February *Programs for the Handicapped* are:

### **Special Education Programs:**

84.027—Handicapped Preschool and School Programs, Division of Assistance to States, Dave Rostetter, (202) 732-1024.

84.027—Preschool Incentive Grants, Division of Assistance to States, Sheila Friedman, (202) 732-1055.

84.025—Handicapped Innovative Programs—Deaf Blind Centers, Division of Innovation and Development, Paul Thompson, (202) 732-1161.

84.086—Innovative Programs for Severely Handicapped Children, Division of Innovation and Development, Paul Thompson, (202) 732-1161.

84.024—Handicapped Early Childhood Assistance, Division of Innovation and Development, Becky Calkins, (202) 732-1157.

84.078—Regional Education Programs for Deaf and Other Handicapped Persons, Division of Innovation and Development, Joe Rosenstein, (202) 732-1174.

84.023—Handicapped Research and Demonstration, Division of Educational Services, Marty Kaufman, (202) 732-1107.

84.026—Handicapped Media Services and Captioned Films, Division of Educational Services, Malcolm Norwood, (202) 732-1172.

84.028—Handicapped Regional Resource Centers, Division of Assistance to States, Etta Waugh, (202) 732-1052.

84.030—Handicapped Teacher Recruitment and Information, Division of Innovation and Development, Paul Thompson, (202) 732-1161.

84.029—Training Personnel for the Education of the Handicapped, Division of Personnel Preparation, Max Mueller, (202) 732-1068.

84.009—Program for Education of Handicapped Children in State Operated or Supported Schools, Division of Assistance to States, William Tyrrell, (202) 732-1025.

Catalog number not assigned—Special Studies of P.L. 94-142, Division of Educational Services, Tom Irvin, (202) 732-1090.

Catalog number not assigned—Secondary Education and Transitional Services for Handicapped Youth Program, Division of Educational Services, William Halloran, (202) 732-1112.

### **Rehabilitation Services and Handicapped Research Programs:**

84.133—National Institute of Handicapped Research, (202) 732-1138 or 732-1139.

84.126—Rehabilitation Services and Facilities Basic Support Program, Office of Program Operations, (202) 732-1397